

Check No. _____
Date Rcvd. _____



Yoga Registration

Summer Session

June 14 – July 26, 2006 (No Class July 5)

All classes are held on Wednesdays at 6:45 PM – 8:00 PM at the library. Participants should wear comfortable, loose-fitting clothing and bring a beach towel or yoga matt to class. Registration deadline is June 5.

Cost: \$45 Shirley Residents / \$50 Non-Residents
Please make checks payable to Town of Shirley,
and mail to Shirley Recreation, 7 Keady Way, Shirley, MA 01464

Name: _____ Sex: M F DOB: _____

Address: _____

Phone: _____ Work/Cell: _____ Email: _____

Medical Insurance Carrier: _____ Policy#: _____

I, the undersigned, agree to forever release the Town of Shirley and all their employees, agents, board members, volunteers and any and all individuals and organizations assisting or participating in Shirley Recreation Yoga from any and all claims, rights of action and causes of action that may have arisen in the past, or may arise in the future, directly or indirectly, from personal injuries to myself or property damage resulting from my participation in Shirley Recreation Yoga.

I also promise, to indemnify, defend, and hold harmless the releasees against any and all legal claims and proceeding of any description that may have been asserted in the past, or may be asserted in the future, directly or indirectly, arising from personal injuries to myself or property damage resulting from my participation in Shirley Recreation Yoga.

I further affirm that I have read this consent and release form and that I understand the contents of this form. I understand that my participation in this program is voluntary and I am free to choose not to participate in said program. By signing this Form, I affirm that I have decided to participate in the Town of Shirley's recreation programs with full knowledge that the releasees will not be liable to anyone for personal injuries and property damage I may suffer participating in Shirley Recreation Yoga.

Participant's Signature: _____ Date: _____